Carleton UNIVERSITY | Faculty of Graduate and Postdoctoral Affairs

BANTING POSTDOCTORAL FELLOWSHIP – 2020 Application
Administrative Candidate Eligibility Form

The supervisor must complete this form, discuss the candidate with the relevant Department Chair/Program Director, and have the form signed by the Chair/Director. It must then be submitted to the faculty's Associate Dean of Research ***no later than July 8, 2020****. A copy of the* ***proposed candidate's updated CV*** *(any format) must be attached. Note that the Bantings are exceptionally competitive at the international level, with an extremely low success rate (about 8%). Before committing to a potential candidate, consider whether the candidate is suitable and sufficiently strong to be a serious contender at this level.*

SECTION A: CANDIDATE'S INFORMATION

Name of Proposed Candidate:

_____
Family Name (surname/last name)

_____
Given Name

Citizenship
(choose one):

- ☐ Canadian Citizen
- ☐ Permanent Resident
- ☐ International

Status:

- ☐ Student: ☐ Full-time ☐ Part-time
- ☐ Postdoctoral Fellow: ☐ Full-time ☐ Part-time
- ☐ Research Associate: ☐ Full-time ☐ Part-time
- ☐ Faculty Appointment: Rank _____
  Tenure Track: ☐ YES ☐ NO
- ☐ Employee: ☐ Full-time ☐ Part-time
- ☐ Other (specify): _____

Proposed Area of Research: _____

Where is the candidate currently located? _____

Highest Degree
(choose one)

PhD (specify): _____ PhD Equivalent (specify): _____

Health Profession Degree (specify): _____

Date Degree was conferred:

_____ _____ _____
Month Day Year

If degree has not yet been conferred, when will it be?

_____ _____
Month Year

Postdoctoral Fellowship Award

Does the candidate presently hold, or have they ever held, a postdoctoral fellowship award?

☐ NO ☐ YES

If **YES**, held from: _____ _____
Month Year

to: _____ _____
Month Year

Grantor: ☐ SSHRC ☐ NSERC ☐ CIHR

☐ OTHER (specify): _____

SECTION B: SUPERVISOR'S INFORMATION

_____
Family Name (surname/last name)

_____
Given Name(s)

_____
Carleton Email Address

SECTION C: DECLARATION AND SIGNATURE

I have discussed this potential candidate with the proposed supervisor and believe the candidate is competitive at the international level:

☐ YES ☐ NO

_____ _____ _____
Department Chair / Program Director Signature Date

SECTION D: COMMENTS